| | | (Column 1) | | (Column 2) | (Column 3) |
|-------------|--|---|-------|---|------------------|
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| | Total | • | Minus | ** | = |
| | Independent | * | Minus | *** | = |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

ADDI-ADDI-RATE TIONAL RATE TIONAL FEE FEE X\$ 9= X\$18= OR X42= X84= OR +140= +280= OR TOTAL OR ADDIT. FEE ADDIT. FEE

OR

OR

+280=

ADDIT. FEE

Application or Docket Number

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

+140=

ADDIT. FEE

TOTAL